



SANDRA SHEWRY
Director

State of California—Health and Human Services Agency
Department of Health Services



ARNOLD SCHWARZENEGGER
Governor

February 26, 2007

Dear Interested Parties:

**HEALTH CARE OPTIONS PROGRAM REQUEST FOR PROPOSAL (RFP) 06-55000
ADMINISTRATIVE BULLETIN 8, ADDENDUM 6**

Administrative Bulletin Number 8, Addendum 6 issued by the California Department of Health Services (CDHS), Office of Medi-Cal Procurement (OMCP), announces information and changes to Request for Proposal (RFP) for the Health Care Options Program. CDHS provides notification to interested parties of the following:

- The enclosure (Addendum 6) incorporates changes to the Data Library Index (Appendix 2); additional documents have been added. To obtain a CD-R with the additional Data Library material, please send an e-mail to the address provided below.

Within the text of the Data Library Index, changes are indicated as an underline and a strikethrough to denote revisions.

In order to configure the Internet and CD version of the RFP to accurately reflect the current requirements and considerations, remove the existing pages and insert the appropriate replacement pages. The website for the electronic version is www.dhs.ca.gov/omcp.

ONLINE AND CD VERSION

To update the RFP, use the instructions in the following chart. Any changes made to the RFP are published as replacement pages in the RFP.

REMOVE EXISTING PAGES	REPLACEMENT PAGES
Health Care Options Data Library Index, page 3 of 9	Health Care Options Data Library Index, page 3 of 9. Updated HCO Informing Materials Packets.
Health Care Options Data Library Index, page 4 of 9	Health Care Options Data Library Index, page 4 of 9. Updated HCO Informing Notices/Health Plan Membership Status Letters.

REMOVE EXISTING PAGES	REPLACEMENT PAGES
Health Care Options Data Library Index, page 7 of 9	Health Care Options Data Library Index, page 7 of 9 Updated Invoices and Invoice Receipts
Health Care Options Data Library Index, page 9 of 9	Health Care Options Data Library Index, page 9 of 9. Added new categories: "Satisfaction Survey Sample" and "Daily New Eligibles By County Report".

Prospective Proposers have five (5) working days from the issue of this transmittal to the postmark date of the proposers' response to submit any objections to the Addendum to the address below:

RFP 06-55000
Attn: Karissa Kanenaga or Ramonda Ramos
CA Department of Health Services
Office of Medi-Cal Procurement, Mail Station 4200
Health Care Options Program
P.O. Box 997413
Sacramento, CA 95899-7413
E-Mail: omcprfp0@dhs.ca.gov

Sincerely,

Original signed by *Donna Martinez*

Donna Martinez, Chief
Office of Medi-Cal Procurement

Enclosure

HEALTH CARE OPTIONS PROGRAM
DATA LIBRARY INDEX

APPENDIX 2

TITLE	FORMAT	DESCRIPTION	DATE ADDED	DATE UPDATED	COMMENTS
		presentations.			
HCO INFORMING MATERIALS PACKETS	HARD COPY	Samples of State-approved informing materials packets (mandatory and voluntary) for all HCO managed care counties which are provided to applicants/beneficiaries to assist them in making informed managed care health plan choices and in navigating the managed care system.	12/3/06	2/26/07	These materials are in English versions only. These materials may not be removed from the HCO Data Library. An additional packet type has been added to the existing samples for all counties entitled "Follow-up Voluntary Medical Packet" including a quick reference guide of packet types for all counties.
HCO INFORMING MATERIALS PACKETS – RANDOM SAMPLE	HARD COPY	A random sample of one (1) HCO managed care county of which Proposers may remove from the HCO Data Library.	12/3/06		These materials are in English versions only.

HEALTH CARE OPTIONS PROGRAM DATA LIBRARY INDEX					APPENDIX 2
TITLE	FORMAT	DESCRIPTION	DATE ADDED	DATE UPDATED	COMMENTS
HCO CHOICE FORM SAMPLE – KERN COUNTY	CD	A sample of the HCO Choice Form provided to beneficiaries in Kern County.	12/6/06		This sample form is in English version only.
HCO INFORMING NOTICES/ HEALTH PLAN MEMBERSHIP STATUS LETTERS	CD	A listing of the various types of informing notices/letters, including a sample of each form, generated by the Contractor to beneficiaries for various reasons (e.g. Disenrollment, Exemption Denial, Incomplete, Annual Re-Notification, etc.).	12/6/06	2/26/07	These sample forms are in English versions only. This item was updated on 2/26/07 to include Example #9 – Medical Exemption Expiration Letter. These sample forms are in English versions only.
HCO SPECIAL DISENROLLMENT REQUEST FORMS	CD	The various forms processed by the Contractor to disenroll beneficiaries from health/dental plan membership for various reasons. Samples include Medical Exemption Request (MERS) form, Emergency Disenrollment Exemption Request (EDER) form, Retroactive Disenrollment Form (RETRO), Plan Disenrollment Request Form (PID), and the Medi-Cal Managed Care Dental Exemption Certification form.	12/6/06		
HCO TELEPHONE CALL CENTER – BASIC CALL CENTER SCRIPT	CD	The State-approved basic script utilized by the Customer Service Representatives (CSR) in the course of answering calls received from beneficiaries, etc. in the HCO Telephone Call Center (TCC).	12/3/06		This item is in English version only.
HCO TELEPHONE CALL CENTER – INQUIRY SCENARIOS	CD	Samples of some of the types of calls received by CSRs in the TCC including examples of responses by CSRs to beneficiaries, etc.	12/19/06		This item is in English version only.
BUSINESS REQUIREMENTS – ENROLLMENT PROCESSING	CD	The business requirements which outline the various functions within HCO in its support of medical and dental managed care programs related to ENROLLMENT PROCESSING.	12/5/06		
BUSINESS REQUIREMENTS – EXEMPTION PROCESSING	CD	The business requirements which outline the various functions within HCO in its support of	12/5/06		

HEALTH CARE OPTIONS PROGRAM DATA LIBRARY INDEX					APPENDIX 2
TITLE	FORMAT	DESCRIPTION	DATE ADDED	DATE UPDATED	COMMENTS
EXEMPTION REQUEST REPORTS	CD	The monthly reports provided by the Contractor to the State that detail all exemptions to health plan enrollment requests received by the Contractor.	5/19/06		
ACCEPTED EXEMPTION REPORTS	CD	The monthly reports provided by the Contractor to the State which details all exemptions to health plan requests that were approved by the State.	5/19/06		
MANDATORY ELIGIBLES REPORTS	CD	The monthly reports provided by the Contractor to the State reflecting the status of the numbers of beneficiaries in mandatory aid codes eligible to receive medical/dental enrollment mailings.	5/19/06		
INVOICES AND INVOICE RECEIPTS	CD	The written documentation from the Contractor of providing monthly invoices for payment to the State.	5/19/06	2/26/07	This item has been updated to include a sample of a Cost Reimbursement Invoice.
MAXIMUS POLICIES AND PROCEDURES /QUALITY ASSURANCE PROCEDURES STANDARDS MANUALS	CD	The Contractor's manuals that outline their State-approved Policies and Procedures/Quality Assurance Procedures that are used to perform contractual requirements of the HCO Program within various operational areas (e.g. Telephone Call Center, Records Retention, Research, Financial Management, Quality Assurance, Facilities Management, etc.).	5/19/06	Q-3028 updated: 1/12/07 Title modified and comment added: 1/30/07	These items were initially provided by the Contractor to CDHS during the Takeover phase of the Contract via HCO Takeover Letters 01-0791 and 01-0792.
HCO FINANCIAL MANAGEMENT MANUAL	CD	The current HCO Financial Management Manual developed by the current Contractor including updates issued since its initial development.	12/5/06		

HEALTH CARE OPTIONS PROGRAM DATA LIBRARY INDEX					APPENDIX 2
TITLE	FORMAT	DESCRIPTION	DATE ADDED	DATE UPDATED	COMMENTS
SACRAMENTO COUNTIES, FOR MAXIMUS FIELD OPERATIONS AND COUNTY SOCIAL SERVICES DEPARTMENTS.		building for HCO Program staff and program activities.			
REPORT USERS MANUAL (RUM)	CD	The report user manual provided by the Contractor to HCO during Takeover which lists and details the various reports generated by the Contractor either manually or by way on-line submission.	1/30/07		
DEFAULT ALGORITHMS – AS OF DECEMBER 1, 2006	CD	The default allocations for each Medi-Cal managed health care plan utilized by the Contractor for auto-assignment of beneficiaries who do not proactively make a health care plan choice.	1/30/07		
HCO TAKEOVER LETTERS	CD	The written letters provided by the Contractor to CDHS during the Takeover phase of the Contract. Takeover deliverables are included within these letters or attached, as appropriate.	1/30/07		
SATISFACTION SURVEY SAMPLE	CD	The survey provided to applicants/beneficiaries after attending an HCO ESR Presentation. The Monthly Results Summary Reports (MSM-C-M83) reflecting survey responses are contained within the Monthly Progress Reports.	2/07		This sample is available in an English version only.
DAILY NEW ELIGIBLES BY COUNTY REPORT	CD	The daily report generated by ITSD of the accounting of eligible beneficiaries to be enrolled in each county.	2/07		